

DECLARATION FOR PRIORITY OR DESIGN  
PATENT APPLICATION (37 CFR 1.63)

☒ Decl. Sub. w/Initial Filing  
☐ Decl. Sub. after Initial Filing (surcharge (37 CFR 1.15 (e)))

Attorney Docket No.: 2132.113  
Inventor Name: Jackowski et al.  
COMPLETE IF KNOWN  
Application No:  
Filing Date:  
Group Art Unit:  
Examiner Name:

As a below named inventor, I hereby declare that:

My residence, post office addr., and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DIAGNOSIS AND TREATMENT OF DEMENTIA UTILIZING THROMBOSPONDIN

the specification which  
☒ is attached hereto OR  
was filed on \_\_\_\_\_ As United States Application No. or PCT Intl.  
Appl. No. \_\_\_\_\_ and was amended on \_\_\_\_\_ (if  
applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN NUMBERS:	COUNTRY:	FOREIGN FILING DATE:	PRIORITY NOT CLAIMED:	CERTIFIED COPY Yes	No

Additional foreign appl. nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER(s): FILING DATE:

\_\_\_\_\_ Addnl. provisional appl.  
Nos. are listed on a  
Supplementary priority data  
Sheet PTO/SB/02B attached.

COPY OF PAPERS  
ORIGINALLY FILED**DECLARATION - UTILITY DESIGN PATENT APPLICATION**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 35(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. PARENT APPLICATION  
or PCT NUMBER:

PARENT FILING DATE:

PARENT PATENT NO:  
(if applicable)

Additional U.S. or PCT international appln.nos. are listed on a supplemental  
priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to  
prosecute this application and to transact all business in the Patent and Trademark  
Office connected therewith: X Customer No: 21917 PLACE CUSTOMER NO.  
BAR CODE LABEL HERE

OR

Registered practitioner(s) name/registration no. listed below.

NAME:	REGISTRATION NO:	NAME:	REGISTRATION NO:
Michael A. Slavin	34,016	Joseph Beckman	45,529
Ferris H. Lander	43,377	Erin Monahan	48,804
C. Fred Rosenbaum	27,110		

DIRECT ALL CORRESPONDENCE TO: \_\_\_\_\_ Customer Number OR  
or Bar Code Label Correspondence address below

NAME: McHale & Slavin, P.A.  
ADDRESS: 4440 PGA Blvd.,  
ADDRESS: Suite 402  
CITY: Palm Beach Gardens STATE: FL ZIP: 33410  
COUNTRY: U.S. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 17 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: \_\_\_\_\_ A Petition has been filed for this unsigned inv.  
GIVEN NAME (first and middle (if any)) \_\_\_\_\_ FAMILY NAME OR SURNAME: \_\_\_\_\_

George Jackowski  
Inventor's signature: \_\_\_\_\_ Date: Dec 20 2001  
Residence: 11725 Keele Street RI  
City: Kettleby State: ONTARIO L0G 1V0 Country: CANADA Citizenship: Canadian  
Post office Address: 11725 Keele St., RI, Kettleby, Ontario L0G 1V0, CANADA  
Additional inventors are being named on the \_\_\_\_\_ Supplemental additional inventor(s)

Page 2 of 3

Express Mail Label EU 001993400US

NAME OF SECOND INVENTOR: \_\_\_\_\_ A Petition has been filed for this unsigned inv.  
GIVEN NAME (first and middle [if any]): \_\_\_\_\_ FAMILY NAME OR SURNAME: \_\_\_\_\_

Rulin Zhang  
Inventor's signature: \_\_\_\_\_ Date: Dec 21, 2001  
Residence: 2397 French Avenue, Apt. 703  
City: Toronto State: ONTARIO Country: CANADA Citizenship: Canadian  
Post Office Address: 2397 French Avenue, Apt. 703, ONTARIO, CANADA  
Additional inventors are being named on the \_\_\_\_\_ Supplemental additional inventor(s)